

PROVIDER

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CLAIM AND ACCOUNT MANAGEMENT TOPICS

Claim & Account Center: Faster, easier access to claim information is available now

Applies to State Fund claims in all locations.

Contact: ORCAProject@lni.wa.gov

In late January, the department introduced the new, L&I Secure Claim & Account Center, a no cost service for attending doctors, employers and injured workers to access claim information. Providers who currently use digital certificates to access L&I Claim information are now able to use a free user ID and password. Information available in this secure website includes:

- Claim status and claim manager's name and phone number
- Authorized treatments
- Hospital and surgery decisions
- Accepted and denied diagnoses
- Vocational information
- · Accepted and denied medications and all drug bills
- Status of medical bills and payments
- All other information from the current, secure online system

As in the past, only providers currently designated as the attending doctor are able to view all information related to claims. The department replaced the requirement for digital certificates with secure logon IDs and passwords. The system is available any time of the day or night and features easy to use web pages that have been tested by L&I providers. Workers and employers can also view information about their claims and accounts in this secure website.

The new Claim & Account Center web application also includes online help. Click on the "help with this page" button or the general "help" button on every page for specific information about that page. Customers also may call 360-902-5999 to contact the L&I Web Customer Support Unit for more assistance with using this online service.

Any claim or account specific questions should be directed to the claim manager or account manager assigned to that claim/account.

Providing information about claims online is just the first step in a multi-phase project. Later this spring, providers will be able to conduct transactions online. This will include the ability to submit a note to the claim file.

Funding is being requested from the state legislature to allow providers to view all documents in a claim file by early 2006, putting the entire patient's medical record at the fingertips of the attending doctor.

Additional phases are being planned that will provide online access to L&I policies and procedures, including the Workers Compensation Adjudicator Manual. No date has been set for placing the manual online.

L&I staff are available to speak to groups of 40 or more people about L&I's Claim & Account Center. To schedule a presentation, contact Julie Monk at **360-902-6031**.

Claim Numbers: New Series

Both the State Fund and Self Insurers have added new series of claim numbers:

- The State Fund is now using "AA" followed by 5 digits. All old claim numbers are also still in use.
- Self Insurers is now using "SA" followed by 5 digits. S, T, or W followed by six digits are also still in use.

Release of Information

Attention all providers in all locations. This article pertains to both State Fund and Self Insured claims.

Contact: Provider Hotline

1-800-848-0811

On all claims, the department requires an information release form from the claimant prior to releasing claim information to anyone other than the claimant, attending physician, medical and vocational service providers who have current bills in the system, and the employer of injury. Anyone else, including a spouse, must be listed on a release form as authorized to receive information.

<u>Submitting Claim Documents to the State Fund: Important information to help ensure fast and accurate processing</u>

Attention: All Providers in all locations.

This article pertains only to correspondence for State Fund claims.

When claims related documents arrive, the State Fund automatically scans then routes them electronically to the correct claims manager, and stores them in the department's imaging system. The paper document is then discarded, never read by a human being...

The State Fund's imaging system cannot read some types of paper, and has difficulty passing other types through its automated machinery.

<u>Please include the claim number in the upper right hand corner of each page of each piece of correspondence you submit</u>. If you do not have the claim number, put the worker's social security number in this spot. This will assure that the information you submit will be routed to the correct worker's file.

Use plain white, 8.5" x 11" paper printed only on one side when submitting documents to the State Fund.

Don't use **highlight markers**. We recommend asterisks or underlining to emphasize text. When scanned, highlighter marks will black out or make information illegible, which eliminates the key information you wanted to emphasize. This may cause claim managers to re-request information you've already submitted.

- Do **not** send **problem paper**:
 - ✓ Colored paper, particularly of "hot" or intense colors, pink being among the worst
 - ✓ Thick or textured paper
 - ✓ Carbonless paper or

Paper with:

- ✓ Shaded areas
- ✓ Black or dark borders especially the top border, and/or
- ✓ Logos or other information in the top $\frac{1}{2}$ " (edge) of the document

State Fund Addresses

Report of Industrial Injury or Occupational Disease:

Department of Labor and Industries PO BOX 44299 Olympia WA 98504-4299

Correspondence for State Fund claims:

Department of Labor and Industries PO BOX 44291 Olympia WA 98504-4291

State Fund provider account information updates:

Department of Labor and Industries Provider Accounts PO BOX 44261 Olympia WA 98504-4261

Provider bills for the State Fund:

Department of Labor and Industries PO BOX 44269 Olympia WA 98504-4269

State Fund refunds (Attach a copy of the remittance advice):

Department of Labor and Industries Cashier's Office PO BOX 44835 Olympia WA 98504-4835

Crime Victims' Program:

Correspondence, billing, and refunds (Attach a copy of the remittance advice):

Department of Labor and Industries Crime Victims' Division PO BOX 44520 Olympia WA 98504-4520

State Fund Service Locations' addresses and contact information is available at:

http://www.lni.wa.gov/Main/ContactInfo/OfficeLocations/default.asp.

State Fund and Other Resources Available to Assist You

Provider Hotline for State Fund Claims

1-800-848-0811

Please be prepared with the worker's claim number and your L&I provider account number, so staff may better serve you. The Provider Hotline can help you with the following.

- Billing & remittance advice questions
- Provider Bulletin, WAC, and RCW questions
- Claim status questions
- Verification of claim diagnosis and procedure codes
- Authorization of diagnostic, medical, and DME services

Interactive Voice Response (IVR) System

1-800-831-5227

The information presented by voice response is current as of the end of business on the last workday. Providers can obtain the following claim information using this line. Both the claim number and your provider account number will be required to access this information.

- Claim manager's name and phone number
- Pending bill information
- Claim status information
- Allowed/denied diagnosis codes
- Allowed/denied procedure codes
- Utilization Review or authorization status for procedures
- Drug restrictions

If your patients need information about their claim, please let them know that the following information can be obtained by using this line. Both the worker's claim number and Social Security Number (SSN) are required to access this information.

- Claim manager's name and phone number
- Time loss compensation rate
- Most recent time loss payment
- Name of the attending physician of record
- Most recent travel or claimant reimbursement paid
- Claim status information
- Protest status

Injured Worker Hotline

1-800-LISTENS or 1-800-547-8367

Workers can access this line to help them:

- Obtain information regarding their claim
- Obtain help in resolving time loss issues

The worker's claim number and SSN are required in order to access this information.

Crime Victims Compensation Program

800-762-3716

For claims beginning with "V" followed by 6 digits or "VA", "VB", "VC", "VH", "VJ", or "VK" followed by 5 digits

Federal Claims, U.S. Department of Labor.

 $206\text{-}553\text{-}5508,\,206\text{-}553\text{-}5521,\,$

For claims beginning with "A13" or "A14"

206-553-5255

Provider Accounts Section for State Fund claims

360-902-5140

Medical Director's Office

Medical Director	360-902-5020
Associate Medical Director	.360-902-5022
Associate Medical Director for Chiropractic	.360-902-4998
Physician and Chiropractic Consultants	

Nurse Consultants (ONCs) for State Fund Claims

Occupational Nurse Consultants (ONCs) assist claim managers, workers and their families, physicians, employers, attorneys, and others involved in getting workers back to work following an injury. They can assist you with:

- Any medical/nursing issues in claims
- Placements in special programs (e.g. rehabilitation and nursing home admissions, home care, case management, detoxification, drug and alcohol treatment, pain clinics)
- Psychiatric care
- Discharge planning

If your call to an ONC is urgent, please call the ONC support staff listed below.

ONC Supervisor	Pat Patnode, RN	360-902-5030
ONC Support Staff		360-902-5013

Occupational and Physical Therapists

Everett	425-290-1382	Tumwater	360-902-6768
Tukwila	206-835-1020	Yakima	509-454-3784
Tacoma	253-596-3880	Spokane	509-324-2550

Pharmacy Consultant for State Fund Claims

Project HELP Program

800-255-9752

The Project HELP program facilitates labor/management communication, helping parties to resolve their industry issues. In addition, Project HELP provides educational programs on how the workers' compensation system works, and is a resource for claim issues. This service is a cooperative effort between the Washington State Labor Council, the Department of Labor and Industries and the employer community.

Provider Materials

For copies of Provider Buttetins, Provider Opadies of Medical Ata Rutes and
Maximum Fee Schedule CD800-848-0811
360-902-6799

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Risk Management Services

Risk Management Specialists and Safety Consultants work with employers to develop and manage working environments that strive for prevention of industrial accidents and injuries and successful mitigation of claims when they do occur. We teach employers to understand their rights and responsibilities in the managing Worker Compensation claims as well as the roles of their partners in successful claim resolution - the worker, the physician and Labor & Industries. We help employers to help their employees work safely, to safely return to their jobs should an injury occur, to develop a supportive, cooperative work environment and hold down the costs of Industrial Insurance for everyone.

Bremerton	360-415-4011	Spokane	509-324-2581
Bellevue	425-990-1456	Tacoma	253-596-3874
Bellingham	360-647-7319	Tukwila	206-248-8280
Everett	425-290-1364	Tumwater	360-902-4837
Seattle	206-515-2832	Yakima	509-454-3779
			509-454-3785

Safety and Health Consultants

Counties	Telephone Numbers
Island, San Juan, Skagit, Snohomish, Whatcom	425-290-1300
King	206-515-2880
Clallam, Jefferson, Kitsap, Pierce	253-596-3800
Clark, Cowlitz, Grays Harbor, Klickitat, Lewis, Mason,	360-902-5799
Pacific, Thurston, Wahkiakum	
Adams, Benton, Chelan, Columbia, Douglas, Franklin,	509-454-3700
Grant, Kittitas, Okanogan, Walla Walla, Yakima	
Southeast Adams, Asotin, Ferry, Garfield, Lincoln,	800-509-8847 or 509-324-2600
Stevens, Pend Oreille, Spokane, Whitman	

Self-Insurance Program

Odd-numbered claims	360-902-6858
Even-numbered claims	360-902-6889
To obtain a copy of the Self-Insured Employer address and phone number list	360-902-6860

Safety and Health Assessment and Research for Prevention (SHARP) 360-902-5669

SHARP is a multi-disciplinary research group within L&I; in addition to epidemiologic research, SHARP manages the state's occupational lead poisoning registry, receives disease reports for public health investigations, and is available for inquiries from doctors on a variety of technical subjects.

TENS for State Fund Claims:

1-800-999-8367 or 1-800-999-TENS

This is the phone number to PMI, the State Fund's TENS contractor. Call for assistance or information about TENS units, supplies, or other issues.

Utilization Review (Inpatient and Outpatient)

This number must be called for authorization of all hospital admissions and certain outpatient procedures. Call at least five days prior to elective hospitalization and within 24 hours, or the next business day, for emergency admissions.



BILLING AND PAYMENT TOPICS

PROVIDER EXPRESS BILLING

Applies to State Fund claims in all locations.

Many providers are enjoying the benefits of submitting bills and receiving remittance advices using the department's Provider Express Billing (PEB) internet-based system. If you would like to take advantage of having access to your remittance advices on the web, receive access to the status of pending bills, or want to reduce your bill processing time and increase the speed of your reimbursements, PEB might be right for you.

Getting Started:

Decide if PEB is right for you. Do you have a lot of claims to submit or just a few? If you only have a few claims or will be submitting infrequently, you may want to continue submitting the paper claim forms to the department.

What you need to apply for PEB:

- A valid Labor and Industries 7 digit provider account number.
- Billing software for claims submission and electronic file creation.
 You will need billing software for data entry of claim information. Provider Express Billing allows you to securely transmit your file to Labor & Industries in our proprietary EMC HCFA-1500 format and UB92 Institutional format or in the EDI HIPAA 837 formats.
- A completed *Electronic Billing Authorization* form.
 This form allows us to authorize your L&I provider number for electronic billing. You may choose to submit directly to us or you may choose an intermediary/clearinghouse to submit bills on your behalf.
 - *Optional* completed *Power of Attorney* form to authorize the receipt of the electronic Remittance Advice by a third party.
- Registration and enrollment in Provider Express Billing.
 Your activation in PEB allows you to Logon to the Provider Express Billing system. Here you can submit
 bills and receive remittance advices over the Internet. You will receive immediate confirmation of
 successfully submitted transmissions and for EDI transactions; PEB provides additional HIPAA compliant
 acknowledgements.
- Electronic file submission testing and approval.

 Anyone submitting electronically must successfully complete testing with the department. If you are a provider or submitter and want to submit directly to L&I, you must choose the file (proprietary or HIPAA) format you will be submitting and successfully test with us in that format. If you choose an intermediary/clearinghouse to submit bills on your behalf, choose an intermediary who has already tested and been approved by L&I for the type of files you will be submitting. Your intermediary/clearinghouse will coordinate your file submission activities with you.

For information on becoming a provider and additional information about Provider Express Billing, visit the Labor & Industries website at www.lni.wa.gov. Click on the *Claims and Insurance* Tab and follow the links under *Provider Billing and Fees* or you may visit the Provider Express Billing website at https://fortress.wa.gov/lni/providerbilling.

If you experience problems when using this online service, look for the help button on every page for guidance or call the department's Web Customer Support Unit at 360-902-5999.

Rebills: Important information to help assure appropriate bill processing

Attention all providers in all locations. This article pertains only to State Fund claims.

- REBILLS should be submitted when you are **required** to rebill (See WAC 296-20-125)
- Your TOTAL BILL was denied, including total bills denied because:
 - o The claim was closed and the claim has now reopened,
 - o The claim was first rejected and the claim has now been allowed and
 - o A diagnosis was at first not allowed and the diagnosis has now been allowed.
- Your bill was sent in over 60 days ago and is not yet showing up on your Remittance Advice

Rebills must be <u>received</u> at the department within one year of the date of service or within one year of the date the final order was issued which reopened or allowed the claim or diagnosis.

Rebills should be submitted on new **ORIGINAL** bill forms. The department may not be able to process photocopies or facsimiles.

MEDICAL TOPICS

Pesticide Exposure: 2005 Cholinesterase Monitoring Update

Applies to doctors in Washington and all State Fund and Self Insured claims.

Contact: John Furman PhD, MN, WISHA Policy & Technical Services 360-902-5666 furk235@lni.wa.gov

Occupational Medicine practitioners can expect to perform more cholinesterase testing on agricultural workers. The Department of Labor & Industries adopted the Cholinesterase (ChE) Monitoring rule for agriculture pesticide handlers, chapter 296-307-148 WAC, in December 2003. The rule requires employers to provide annual pre-exposure baseline and periodic cholinesterase testing to employees who handle toxicity class I and II cholinesterase-inhibiting pesticides above a specific exposure threshold.

Due to difficulties in comparing test results between different laboratories and test methodologies, you may only use the Washington State Public Health Laboratory in Shoreline for this program. All blood samples must be shipped cold to the Public Health Laboratory where testing is conducted within 48 hours of sample collection. For the ChE test requisition form, sample handling instructions, and comprehensive resources on L&I's Cholinesterase Monitoring see http://www.lni.wa.gov/Safety/Topics/AtoZ/Cholinesterase/Providers.asp.

Recent program changes include:

- Now, medical monitoring is required for workers who handle ChE-inhibiting pesticides for 30 or more hours in any consecutive 30 day period.
- A new test requisition form has been developed for 2005 and is available on the ChE medical providers' web page shown above.
- All employees electing to participate in the ChE testing program must give written consent and authorization to share ChE test results with their employer. Refusal to provide written consent constitutes declination for program participation.
- Per legislative mandate employers must report employee pesticide handling hours to the medical provider with each periodic ChE test. The handling hours report form is to be attached to each test requisition submitted to the Public Health Laboratory.
- L&I will continue to reimburse employers for all program medical costs incurred through June 30, 2005.

Physician Peer Review Program

Applies to State Fund claims in all locations.

Contact: Paulette Golden, Provider Review and Education Unit 360-902-6823

This article explains the purpose and procedure for L&I's physician peer review program.

The Department of Labor and Industries, Provider Review Unit, conducts reviews of health care providers who are furnishing services to industrially injured/ill workers. The purpose of these reviews are to assure that injured workers are receiving high quality, medically necessary care provided within accepted standards of practice and the department's Medical Aid Rules.

For the past fifteen years, L&I has directed that effort through education, outreach by L&I staff doctors, and by asking independent, specialty matched doctors to review claimant medical records. The review is performed to see if opportunities exist for education or advice on how to work with the unique needs of injured workers. The department's authority to conduct these reviews is contained in Revised Code of Washington (RCW) 51.36.100 and 51.36.110. The RCWs are available for reference at the end of this article.

Physicians are initially selected for review based on statistics, derived from the department's Medical Information Payment System (MIPS), which indicate he/she is the attending physician for a specified number of workers who have an unusually high duration of time-loss.

The department has recently contracted with Permedion, a medical peer review firm based in Westerville, Ohio, to provide expert peer review of the medical records contained in the claim files of workers receiving treatment from those physicians who meet the selection criteria. The contract of Permedion only includes review of MDs, Dos, and dentists. During the course of the review, the specialty matched reviewer from Permedion may contact the reviewed doctor to gather additional information.

Permedion will provide the department with a report of their review findings and any recommendations. The department will then generate a report and provide each reviewed physician with feedback. Should any issues be noted, the physician will be given the opportunity to provide the department with additional and/or clarifying information. As noted in RCW 51.36.110, the department can take action if warranted. Actions can include but are not limited to mandatory education, monitoring, restrictions, or the department can suspend or revoke the provider's ability to treat injured workers.

The contract with Permedion is not comprehensive and other health professionals are still being reviewed by the department on a case by case basis by other specialty matched health professionals.

RCW 51.36.100

Audits of health care providers authorized.

The legislature finds and declares it to be in the public interest of the residents of the state of Washington that a proper regulatory and inspection program be instituted in connection with the provision of medical, chiropractic, dental, vocational, and other health services to industrially injured workers pursuant to Title 51 RCW. In order to effectively accomplish such purpose and to assure that the industrially injured worker receives such services as are paid for by the state of Washington, the acceptance by the industrially injured worker of such services, and the request by a provider of services for reimbursement for providing such services, shall authorize the director of the department of labor and industries or the director's authorized representative to inspect and audit all records in connection with the provision of such services.

RCW 51.36.110

Audits of health care providers -- Powers of department. (Expires June 30, 2007.)

The director of the department of labor and industries or the director's authorized representative shall have the authority to:

- (1) Conduct audits and investigations of providers of medical, chiropractic, dental, vocational, and other health services furnished to industrially injured workers pursuant to Title 51 RCW. In the conduct of such audits or investigations, the director or the director's authorized representatives may examine all records, or portions thereof, including patient records, for which services were rendered by a health services provider and reimbursed by the department, notwithstanding the provisions of any other statute which may make or purport to make such records privileged or confidential: PROVIDED, That no original patient records shall be removed from the premises of the health services provider, and that the disclosure of any records or information obtained under authority of this section by the department of labor and industries is prohibited and constitutes a violation of RCW 42.52.050, unless such disclosure is directly connected to the official duties of the department: AND PROVIDED FURTHER, That the disclosure of patient information as required under this section shall not subject any physician, licensed advanced registered nurse practitioner, or other health services provider to any liability for breach of any confidential relationships between the provider and the patient: AND PROVIDED FURTHER, That the director or the director's authorized representative shall destroy all copies of patient medical records in their possession upon completion of the audit, investigation, or proceedings;
- (2) Approve or deny applications to participate as a provider of services furnished to industrially injured workers pursuant to Title <u>51</u> RCW;
- (3) Terminate or suspend eligibility to participate as a provider of services furnished to industrially injured workers pursuant to Title 51 RCW; and
- (4) Pursue collection of unpaid overpayments and/or penalties plus interest accrued from health care providers pursuant to RCW 51.32.240(6).

PUBLICATIONS, FORMS, AND REFERENCE MATERIALS

Many publications are available online, including those listed below. To obtain a copy go to http://www.lni.wa.gov/FormPublications/PubsByName.asp

- "Attending Doctors' Handbook"
- "Lessons for Lifting and Moving Materials"
- "Medical Examiners Handbook"
- "Office Ergonomics: Practical Solutions for a Safe Workplace"
- "Workers' Guide to Industrial Insurance Benefits" (available in English, Russian, Vietnamese, and Spanish)
- "Your Body, Your Job: Preventing Carpal Tunnel Syndrome and other Upper Extremity Musculoskeletal Disorders"

Use the links or phone numbers below to access the following products and/or information:

Billing and Payment: Fee Schedules, Electronic Billing, and More

http://www.lni.wa.gov/ClaimsIns/Providers/Billing/default.asp

Billing Instructions for:

- ✓ HCFA-1500 (F248-094-000)
- ✓ Home Care (F245-088-000)
- ✓ Hospital Services (F248-014-000)
- ✓ Miscellaneous Services (F248-095-000)
- ✓ Pharmacy Prescriptions (F248-021-000)
- ✓ Retraining and Job Modification Expenses (F248-015-000)

Crime Victims Compensation Program (CVCP):

800-762-3716

800-848-0811

- CVCP Mental Health Treatment Guidelines
- CVCP Mental Health Treatment Rules and Fees
- CVCP Program Billing Guidelines for Sexual Assault Examination in Children
- CVCP Billing Guidelines for Sexual Assault Examination in Adults

Occupational Health Services Project --

http://www.lni.wa.gov/ClaimsIns/Providers/Research/OHS/default.asp

Office of the Medical Director:

http://www.lni.wa.gov/ClaimsIns/Providers/Treatment/default.asp for:

- Chiropractic Health
- Coverage Decisions for Medical Technologies and Procedures
- Medical Device Assessments
- Prescription Drug Policy
- Research
- Technology Assessments
- Treatment Guidelines
- Utilization Review

Provider Account Application Form and the W9 form - http://www.lni.wa.gov/ClaimsIns/Providers/Manage/PreAuth/default.asp
Provider Accounts Change Form - http://www.lni.wa.gov/Forms/pdf/245365af.pdf
Provider Bulletins & Updates - http://www.lni.wa.gov/ClaimsIns/Providers/Billing/ProvBulletins/default.asp
Provider Education Seminars - http://www.lni.wa.gov/ClaimsIns/Providers/Vocational/default.asp
Vocational Services Information - http://www.lni.wa.gov/ClaimsIns/Providers/Vocational/default.asp

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